	UNCLASSIFI	ED CONFID	ENTIAL	SECRET
	CE	NTRAL INTELLIGENCE	AGENCY	
	OF	FICIAL ROUTIN	G SLIP	
то	NAME	NAME AND ADDRESS INITIALS DA		
1	AD/RR		TEA	~
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	ACTION	DIRECT REPLY	PREPARE	REPLY
	APPROVAL	DISPATCH	RECOMMENDATION	
	OMMENT FILE		RETURN	
-	ONCURRENCE INFORMATION		SIGNATURE	
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		HERE TO RETURN TO ADDRESS AND PHONE NO		

FORM NO. 958 1 APR 55 237 Replaces Form 30-4 which may be used.